

Financial-Aid Application

Thank you for your interest in the Kentucky Historical Society and Camp ArtyFact! We have a limited number of scholarship assistance available for families that demonstrate financial need. Applications are reviewed on a first-come basis and should be received at least two weeks prior to the beginning of the first class. There is a limit of one (1) half-day camp available per family. The Kentucky Historical Society Foundation cannot guarantee scholarships to all who apply.

Please complete and submit this form, immediately after submitting a separate Camp ArtyFact online registration form.

Scholarship application.

Child: _____ Parent/ Guardian: _____

Address: _____

City, State, Zip Code: _____

Daytime Phone: _____ Cell Phone: _____

Total Number of Dependents: _____

Reason for applying for scholarship: _____

How will your child benefit from Camp ArtyFact's educational programming? _____

Verification

Financial forms are not required for approval, however please provide contact information for one or more of the following so that we may confirm your need/situation:

Social worker Phone: _____ Email: _____

Child's teacher or guidance counselor Phone: _____ Email: _____

Family Resources Center Representative Phone: _____ Email: _____

I verify that all of the information submitted is correct, complete, and accurate. If my situation changes, I agree to notify the Director of Camp ArtyFact at the Kentucky Historical Society within 30 days of this application.

Signature: _____ Date: _____

Please mail, fax or hand deliver this form to: Kentucky Historical Society
Attn: Greg Hardison
100 West Broadway, Frankfort, KY 40601
fax (502) 564-4701
greg.hardison@ky.gov

FOR CAMP OFFICE USE ONLY:

Review Date: _____

Reviewers:

Camp Director: _____

Foundation Representative: _____ or Deputy Director: _____

Circle action below, and attach this form to the printed registration:

APPROVE

DISAPPROVE, _____